12-26-00

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## UTILITY PATENT APPLICATION

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UTILITY	Attorney Docket No.	101221EPD.US
PATENT APPLICATION	First Inventor	McCUNE
TRANSMITTAL	DIRECT PHASE A	ND FREQUENCY DEMODULATION

O IKA	ANSWILLAL	Title	DIFECT PRASE AN	D LUEGOENC	T DEMODULATION				
(Only for new nonprovisi	ional applications under 37 CFR 1.53(b)	) Expre	ess Mail Label No.	EF418573	3481US				
i	ATION ELEMENTS	AL	JUKESS IU:	Box Patent App					
Fee Transmittal (Submit an original and 2. Applicant claims See 37 CFR 1.2 3. Specification - Descriptive titl - Cross Referer - Statement Re - Reference to s or a computer - Background c - Brief Summar - Brief Descript - Detailed Desc - Claim(s) - Abstract of the  4. Drawing(s) (35  5. Oath or Declaration  a. Newly exer Copy from (for continu)  i. DELE Signed s named in 1 63(d)(2  6. Application Data  17. If a CONTINUING APPL	[Total Pages 10 ] ent set forth below) e of the invention ince to Related Applications garding Fed sponsored R & D sequence listing, a table, program listing appendix if the Invention y of the Invention ion of the Drawings (if filed) wription e Disclosure  U.S.C. 113) [Total Sheets 2 ] [Total Pages 2 ]  cuted (original or copy) a prior application (37 CFR 1.63 (d)) ation/divisional with Box 17 completed) TION OF INVENTOR(S) tatement attached deleting inventor(s) the prior application, see 37 CFR ) and 1.33(b). a Sheet. See 37 CFR 1.76	9 10 11 12 13 14 15 16	ADDRESS TO: Box Patent Application Washington, DC 20231  7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement Power of (when there is an assignee)  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449  13. Preliminary Amendment  14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Other:						
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) Of prior application No Frior application information  Examiner  Group   Art Unit.  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.									
	e relied upon when a portion has been inac	lvertently on	divisional application an hitted from the submitted						
18. CORRESPONDENCE ADDRESS									
Customer Number or Bar Co	de Label Misert Cüstorier No. or Atlaci		or 💻	] Corresponden	ce address below				
Name	TROPIAN, INC.								
	ATTENTION: PATENT COU								
Address	20813 Stevens Creek Boulev	ard, Suite	e 150						
City	Cupertino	State	CA	Zip Cod	de 95014-5649				
Country	US 7	elephone	(408) 865-1300		(408) 865-1385				
Name (Print/Type) Signature	Michael J. Ure	Re	egistration No. (Attor	ney/Agent)	33,089				

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Complete if Known

	_	Appl	icatio	n Num	ber				D\=
for FY 2000		Filing	g Dat	е				TO	7
Patent fees are subject to annual revision.		First	Nam	ed Inv	entor	McCUNE	= "		8
Small Entity payments <u>must</u> be supported by a small entity state otherwise large entity fees must be paid. See Forms PTO/SB/0	ment, 1 9-12	Exar	niner	Name	:			: S	3=2
See 37 C.F.R. §§ 1.27 and 1.28.		Grou	ın / A	rt Unit					20
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METHOD OF PAYMENT (check one)	<u> </u>			F	EE CA	LCULATION	ON (co	ntinued)	
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to	Larg	DDIT	y Sma	II Entit					
Deposit Account	Fee Cod		Fee Cod	Fee le (\$)		Fee Des	scription	n	Fee Paid
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Charge Any Additional Fee Required Under 37 CFR §§ 1 16 and 1 17	147	2,520	147	2,520	For fili	ng a request fo	or reexan	nnation	
	112	920*	112	920*		sting publicati	on of SiF	prior to	
2. Payment Enclosed:  Check Order Other	113	1,840*	113	1,840	* Reque	ner action sting publicati ner action	on of SIF	after	
FEE CALCULATION	115	110	215	55		sion for reply w	vithin first	month	
	116	380	216		Extens	sion for reply v	vithin sec	ond month	
1. BASIC FILING FEE Large Entity Small Entity	117	870	217	435	Extens	sion for reply v	vithin thin	d month	
Fee Fee Fee Fee Description	118	1,360	218	680	Extens	sion for reply v	vithin fou	th month	
Code (\$) Code (\$) Fee Paid	128	1,850	228	925	Extens	ion for reply w	vithin fifth	month	
101 690 201 345 Utility filing fee 710	119	300	219	150	Notice	of Appeal			
106 310 206 155 Design filing fee  107 480 207 240 Plant filing fee	120	300		150	Filing a	a brief in suppo	ort of an a	appeal	
108 690 208 345 Reissue filing fee	121	260	221	130	Reque	st for oral hea	ring		
114 150 214 75 Provisional filing fee	138	1,510	138	1,510	Petition	n to institute a	public us	e proceeding	
	140	110	240	55	Petition	n to revive - ur	navoidab	le	
SUBTOTAL (1) (\$) 710	141	1,210	241	605	Petition	n to revive - ur	nintention	al	
2. EXTRA CLAIM FEES	142	1,210	242	605	Utılity i:	ssue fee (or re	eissue)		
Fee from Ext <u>ra Claims below Fee Paid</u>	143	430	243	215	Design	issue fee			
Total Claims20** = X = X	144	580	244	290	Plant is	ssue fee			
Claims L = =	122	130	122	130	Petition	ns to the Comi	missioner		
Multiple Dependent =	123	50	123	50	Petition	ns related to p	rovisiona	applications	
**ror number previously paid, if greater; For Reissues, see below  Large Entity Small Entity	126	240	126	240	Submis	ssion of Inform	ation Dis	closure Stmt	
Fee Fee Fee Fee Description	581	40	581	40	Record	ling each pate	nt assign	ment per	
Code (\$) Code (\$)  103 18 203 9 Claims in excess of 20	146	690	246	345	Filing a	ty (times numb submission a		,	40
102 78 202 39 Independent claims in excess of 3	149	690	2/10	345	(37 CF	R § 1.129(a))			
104 260 204 130 Multiple dependent claim, if not paid		000	240	040		ch additional in ed (37 CFR §			j
109 78 209 39 ** Reissue independent claims over original patent	Other	fee (spe	ecify)						
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other	fee (spe	ecify)					· AE-42-	
SUBTOTAL (2) (\$)	Redu	ced by	Basic	Filing F	ee Paid	SUB	TOTAL	(3) (\$)	40
SUBMITTED BY						Co	mplete (#	applicable)	
Name (Pnntl Type) Michael J. Ure		Registr (Attorne			3,089	Te	lephone	(408) 865	-1300
Signature Mholendan			,	<del></del>		Da	te	12/21/0	

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